

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO.  | DATE     |
|---------------------------|----------|---------|----------|
| FEE DETERMINATION         |          |         |          |
| O.I.P.E. CLASSIFIER       |          | 10      | 10-24-01 |
| FORMALITY REVIEW          | TD       | JC 1125 | 11/29/01 |
| RESPONSE FORMALITY REVIEW | AI       | 375     | 2/15/02  |

BEST AVAILABLE COPY

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Final | Original | Date    |
|-------|-------|----------|---------|
| 1     | ✓     | ✓        | 1/23/02 |
| 2     | ✓     | ✓        | 1/23/02 |
| 3     |       |          |         |
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| 5     |       |          |         |
| 6     |       |          |         |
| 7     |       |          |         |
| 8     |       |          |         |
| 9     | ✓     | ✓        |         |
| 10    | ✓     | ✓        |         |
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| 25    | ✓     | ✓        |         |
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| 39    | ✓     | ✓        |         |
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| 42    |       |          |         |
| 43    | ✓     | ✓        |         |
| 44    | ✓     | ✓        |         |
| 45    | ✓     | ✓        |         |
| 46    | ✓     | ✓        |         |
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| 49    |       |          |         |
| 50    | ✓     | ✓        |         |

| Claim | Final | Original | Date    |
|-------|-------|----------|---------|
| 51    | ✓     | ✓        | 1/21/02 |
| 52    | ✓     | ✓        | 1/21/02 |
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| 80    |       |          |         |
| 81    | ✓     | ✓        |         |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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 02/15/02